

☐ Male

Application for a Career and Technical License

State of Iowa Board of Educational Examiners Licensure

Grimes State Office Building

Year

Month

Maiden Name

Revised 8/05

INSTRUCTIONS:

1. Complete the first four sections of this form, and have your administrator complete the last section.

Social Security #

First Name

- 2. A complete application must include the completed application, official transcripts (if any), fingerprint packet, and fees.
- 3. Fees include the \$85 application fee and the \$52 background check fee (a single check or money order for \$137 is acceptable).
- Send all materials and check or money order (made payable to Board of Educational Examiners) to:
 State of Iowa, Board of Educational Examiners/ Licensure, Grimes State Office Building, Des Moines, Iowa 50319-0146.

Middle Name

Date of Birth

5 .Please allow 6 to 8 weeks to process.

Applicant's Folder # (If already assigned)

Last Name

Street and number	City	City			Zip Code
	W 1 B		ļ <u> </u>		
Home Phone	Work Phone		Em	nail Address	
()	()				
A minimum of 6000 hours of rece for the issuance of this license. Pl you are applying.					
Name and Address of Employer	Dates of Employment	Hours/ Week	Total Hours	Describe Position and Nature of Work	
Employer:	From:				
Address:	To:				
Employer:	From:				
Address:	To:				
Employer:	From:				
Address:	То:				
Employer:	From:				
Address:	То:				
	1	L	1		

Have you ever held an Iowa teaching license?Yes	No	
Please check the type of license for which you are applying.		
Provisional Secondary Career and Technical Teaching ISecondaryCareer and Technical Teaching License Secondary		-
It is required that ALL of the following course work be comp Teaching License. If you have already completed any of this completed. New teacher Workshop (To be completed during or beforeCurriculum (course planning and construction) Methods of teachingFoundations of vocational educationEvaluation of students and program (Often called EducationAn Iowa approve Human Relations course	work, please check the course an	
Background Information:		
his application if no further conviction(s) has occurred. a. Yes No PR Have you ever been convicted of a c. Yes No PR Have you ever been convicted of a c. Yes No PR Have you ever had a founded report. b. Yes No PR Have you ever had an educational examiner of Fraud: Fraud in procurement of a license or false complaint with the lowa Board of Educational Examiners. Certify under penalty of perjury and pursuant to the laws of the	a crime other than parking or spec ort of child abuse made against you license revoked or suspended? ifying records for licensure purpor	ses will constitute grounds for filing a
Signature of Applicant	Date	
TO BE COMPLETED BY ADMINISTRATOR IN THE I	HIRING SCHOOL DISTRICT	(type or print)
The school system requests that (name of applicant)		(name of applicant)
be issued a Provisional Career and Technical Teaching Licen	se to serve as	
(List positi	on and grade level.)	
I verify that the applicant will instruct only in that specific ca applicant will instruct only those students who are enrolled in		ich he/she is endorsed and that the
This request is for period beginning with the following school	1 year- 2 2	
(Administrator's Signature)	(Print or type administrator's name)	(date)
(Applicant's Signature)	(date)	